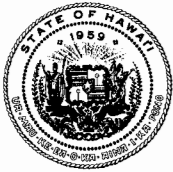


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**HAWAII STATE ETHICS COMMISSION**  
 1001 BISHOP STREET, ASB TOWER 970  
 P.O. BOX 616, HONOLULU, HAWAII 96809  
 TEL: 587-0460 FAX: 587-0470  
 email: ethics@hawaiiethics.org

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STATE OF HAWAII  
STATE ETHICS COMMISSION**LOBBYIST REGISTRATION FORM**

(Type or Print Clearly)

<b>PART I LOBBYIST</b>			
NAME (Last)	(First)	(Middle)	TELEPHONE
Ching,	Carleton	K. L.	(808) 548-3793
MAILING ADDRESS (Street)			FAX
P. O. Box 898900 Mililani, HI 96789			548-6690
(City)	(State)	(Zip Code)	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Castle & Cooke Homes Hawaii, Inc.			(808) 548-4811
MAILING ADDRESS (Street)			FAX
P. O. Box 898900 Mililani, HI 96789			(808) 548-6690
(City)	(State)	(Zip Code)	

<b>PART II ORGANIZATION</b>	
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)	TELEPHONE
Castle & Cooke Homes Hawaii, Inc.	(808) 548-4811
MAILING ADDRESS (Street)	FAX
P. O. Box 898900 Mililani, HI 96789	(808) 548-6690
(City)	(State) (Zip Code)
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT	TELEPHONE
Harry A. Saunders	(808) 548-4863
MAILING ADDRESS (Street)	FAX
P.O. Box 898900	(808) 548-2975
(City)	(State) (Zip Code)
Mililani, HI 96789	

**PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY**

Agriculture

Education

Human Services

Science, Technology &  
Economic DevelopmentCommunications &  
Public UtilitiesGovernment Operations &  
FinanceIntergovernmental Relations,  
International Affairs

Tourism &amp; Recreation

Consumer Protection &  
Commerce

Hawaiian Affairs

Labor &amp; Employment

Transportation

Culture, Arts, Historic  
Preservation

Health

Planning, Land & Water  
Use ManagementOther: (indicate below)  
\_\_\_\_\_  
\_\_\_\_\_Ecology, Energy  
Environmental Protection

Housing

Public Safety &amp; Corrections

**PART IV CERTIFICATION OF LOBBYIST***I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.*

(Signature of Lobbyist)

(Date)

**PART V AUTHORIZATION TO LOBBY**

NAME

TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED

Harry A. Saunders

President

NAME OF ORGANIZATION (if applicable)

TELEPHONE

Castle &amp; Cooke Homes Hawaii, Inc.

548-4811

MAILING ADDRESS (Street)

FAX

P.O. Box 8989000

548-2975

(City)

(State)

(Zip Code)

Mililani, HI 96789

*I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.*

(Signature of Authorizing Officer or Person Represented)

(Date)